

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Miragaya, et al. Examiner: Macauley, Sheridan R
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For: FORMULATIONS FOR THE RECTAL ADMINISTRATION OF
THROMBOLYTICALLY-ACTIVE AGENTS

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

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I hereby certify that this correspondence is being transmitted
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PETITION FOR EXTENSION OF TIME

Pursuant to 37 C.F.R. 1.136(a), an extension of time of

one month	<input type="checkbox"/>	\$ 130.00	Small Entity	<input checked="" type="checkbox"/>	\$ 65.00
two months	<input type="checkbox"/>	490.00		<input type="checkbox"/>	245.00
three months	<input type="checkbox"/>	1,110.00		<input type="checkbox"/>	555.00
four months	<input type="checkbox"/>	1,730.00		<input type="checkbox"/>	865.00
five months	<input type="checkbox"/>	2,350.00		<input type="checkbox"/>	1,175.00

is hereby requested to

- ☒ respond to the Office Action mailed October 5, 2009
☐ file a Notice of Appeal _____
☐ file an Appeal Brief now due _____
☐ other (specify) _____

The requisite fee pursuant to 37 C.F.R. §1.17 is

- ☐ enclosed by check.
☒ The Commissioner is hereby authorized to charge our Deposit Account No. 08-2461.

If any additional fees are due or any overpayment has been made, please charge or credit
our Deposit Account No. 08-2461 for such sum.

Respectfully submitted,

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